PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001									989	16-	149	7-0
		CLAIMS A		.ED - PART I olumn 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS				42		(Goldmin 2)		RATE	<u> </u>	OF		ENTITY
FOR			<u> </u>	NUMBER FILED		IMBER EXTRA					RATE	FEE
TOTAL CHARGEABLE CLAIMS			 	4 2 minus 20=				BASIC FEE 37		OF	BASIC FE	740.00
INDEPENDENT CLAIMS					*	22		X\$ 9=	<u> </u>	OR	X\$18=	396
MULTIPLE DEPENDENT CLAIM P						0		X42=		OR	X84=	
L'	OLTIPLE DEPE	PRESENT				+140:		+			<u> </u>	
*	f the differenc	e in column 1 is	s less than :	less than zero, enter "0" in col			L			OR		
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	1136
		(Column 1)		(Column 2) (Column 3)			9	SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL	7	RATE	ADDI- TIONAL
	Total	*	Minus	**	On	=		· · ·	FEE	-		FEE
	Independent	*	Minus	***		=	L	X\$ 9=	<u> </u>	OR	X\$18=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT		CLAIM			X42=		OR	X84=			
								140=		OR	+280=	· · · · · · · · · · · · · · · · · · ·
								TOTAL		┨┈╏	TOTAL	
_		(Column 1)		(Colum	n 2)	(Column 3)	AUL	DIT. FEE		_	ADDIT. FEE	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE] [RATE	ADDI- TIONAL
	Total	*	Minus	**		=		 (\$ 9=	1	1.	VC10	_FEE_
	Independent	*	Minus	***		=	-			OR	X\$18=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT (CLAIM		<u> </u>	(42=		OR	X84=	
								140=		OR	+280=	
								TOTAL IT. FEE		OR A	TOTAL DDIT. FEE	
		(Column 1) CLAIMS		(Column	12)	(Column 3)						
MEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	**		=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9=	<u>ree</u>	F	V240	FEE
	Independent		Minus	***		=-	 			OR	X\$18=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT C	LAIM		X	12=		OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR	+280=	
*** f	the "Highest Nur	nber Previously Pai mber Previously Pai ber Previously Paid	a For" IN THIS	SPACE is le	ss than	20, enter "20."	ADDIT	OTAL FEE the app	ropriate box	OR _{AD}	TOTAL DDIT. FEE nn 1.	

FORM PTO-875 (Boy 8/01)